

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Sheshakamal H. Jayaram et al. :  
Serial No.: 10/599,424 : Group No.: 1724  
Filed: August 1, 2008 : Examiner: Phasge, Arun S.  
For: ELECTRIC FIELD FLUID :  
TREATMENT CHAMBER :

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:  
Transmittal (3 pages)  
Amendment in response to the Office Action dated April 4, 2011 (13 pages)

STATUS

2. Applicant  
☒ claims small entity status.  
☐ is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) \_\_\_\_\_ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ first month	\$ 130.00	\$ 65.00
_____ second month	\$ 490.00	\$ 245.00
_____ third month	\$ 1,110.00	\$ 555.00
_____ fourth month	\$1,730.00	\$ 865.00
_____ fifth month	\$2,350.00	\$1,175.00

Fee: \$ 0

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

— An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_

OR

- (b) — Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

### FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL RATE FEE	OR	ADDITIONAL RATE FEE
TOTAL INDEP.	34	MINUS	30	=4	x \$26.00 = \$104		x \$52.00 = \$
		MINUS		=	x \$110.00 = \$		x \$220.00 = \$
—	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$195.00 = \$		+ \$390.00 = \$
					TOTAL ADDITIONAL FEE \$104	OR	TOTAL ADDITIONAL FEE \$

- (a) ☐ No additional fee for Claims is required

OR

- (b) ☒ Total additional fee for claims required \$ 104.00

### FEE PAYMENT

5. Attached is a check in the sum of \$ \_\_\_\_\_
- ☒ Charge Deposit Account No. 01-2384 the sum of \$104.00.

**FEE DEFICIENCY**

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. ☐ Other:



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